

From: Mr. Robert L. Dickerson, Father and Court Appointed Guardian
for Brandon R. Dickerson
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FILED
in the Clerk's Office
U.S. District Court,
EDNY, Brooklyn
Jun 25, 2023, 6:41 PM
Pro Se Office via Box.com

To: Hon. Eric Komitee
United States District Court

Eastern District of New York
225 Cadman Plaza East
Brooklyn New York 11201

June 25th, 2023

Re: Dickerson v. Mazloumi, Siegal case # CV-23-3859

Dear Justice Komitee:

I again am contacting the Court because now defendant(s) Siegal and Mazloumi have done the unthinkable.

The defendant(s) have literally kidnaped my son from North Shore Hospital and has returned him to the facility where he nearly lost his life through their negligence. I summoned the Nassau County Police to the hospital to document a report.

These defendant(s) are committing crimes against my family legally cloaked behind a jurist robe. Defendant Siegal has threatened me with jail and tens of thousands of dollars in attorney fees if I don't comply with giving her jurisdiction over my son. She has indicated that I will never see my son again.

Your Honor, I am a senior citizen, with a severely incapacitated and disabled adult child. Defendant(s) are intentionally attempting to cause unwarranted stress on me to disable me or worse, to end my life.

I desperately request the assistance of this Court because I am now in fear for my life and the life of my son Brandon from defendant(s) Siegal and Mazloumi.

Please Help.

Thank you



Mr. Robert L. Dickerson

Agency: <u>NCPD</u>	B	Incident # <u>230445013</u>	Complaint # <u>22302361806</u>
Describe Victim's prior domestic incidents with this suspect (Last, Worst, First): <u>None</u>			
If the Victim answers "yes" to any questions in this box refer to the NYS Domestic and Sexual Violence Hotline at 1-800-942-6906 or Local Domestic Violence Service Provider: ()			
Has Suspect ever: Threatened to kill you or your children? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Strangled or "choked" you? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Beaten you while you were pregnant? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is suspect capable of killing you or children? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is suspect violently and constantly jealous of you? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Has the physical violence increased in frequency or severity over the past 6 months? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is there reasonable cause to suspect a child may be the victim of abuse, neglect, maltreatment or endangerment? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If Yes, the Officer must contact the NYS Child Abuse Hotline Registry # 1-800-635-1522 .			
Was DIR given to the Victim at the scene? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No if NO, Why:		Was Victim Rights Notice given to the Victim? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No if NO, Why:	
Signatures:			
Reporting Officer (Print and Sign include Rank and ID#)		Supervisor (Print and Sign include Rank and ID#)	

STATEMENT OF ALLEGATIONS/SUPPORTING DEPOSITION

* Officers are encouraged to assist the Victim in completing this section of the form.

Suspect Name (Last, First, M.I.)Dickerson, Geneva

I Robert Dickerson (Victim/Deponent Name) state that on 6 / 23 / 2023, (Date)
 at 300 Community Drive, Manhasset, NY (Location of incident) in the County/City/Town/Village Manhasset

of the State of New York, the following did occur:

I am having a custodial battle over my son with my daughter and a lawyer named Abraham Mazloumi. My son is currently under medical care and my daughter and Abraham Mazloumi are preventing me from providing such care. My son was removed from North Shore Manhasset, 300 Community Drive, Manhasset NY 11030 to Queen Nassau Nursing home against my wishes. This report is for documentation purposes only. Officer Kenney has written this document for me, I have read it and it is true.

(Use additional page as needed)

False Statements made herein are punishable as a Class A Misdemeanor, pursuant to section 210.45 of the Penal Law.

Victim/Deponent Signature

Date

Witness or Officer Signature

Date

Interpreter Signature and Interpreter Service Provider Name

Date

Interpreter Requested ☐ Yes ☒ No Interpreter Used ☐ Yes ☒ No**Note:**

Whether or not this form is signed, this DIR Form will be filed with Law Enforcement.

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